

# **FULBRIGHT**

## **TEACHER AND ADMINISTRATOR**

### **EXCHANGE**

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## **APPLICATION SECTION**



Please complete this checklist and enclose it with your application package. Please do not staple any of your application pages (paperclips may be used). Mail all application materials to:

United States Department of State  
Fulbright Teacher and Administrator Exchange Program  
600 Maryland Avenue, S.W.  
Suite 320  
Washington, DC 20024

The application deadline is **October 15, 2000**

1. Does your package include:
- |  |                              |                             |
|--|------------------------------|-----------------------------|
| a. 1 Fulbright Foreign Scholarship Board form?             | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. 1 original and 1 copy of the application?               | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. 1 original and 1 copy of the essay?                     | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| d. 1 "Administrative Approval for Applicant" form?*        | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| e. 1 "Immediate Supervisor Reference for Applicant" form?* | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| f. 2 additional references?*                               | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

*[Please do not send a résumé or audio or video tapes.]*

2. Are any of the above documents being sent under separate cover? ☐ Yes ☐ No  
If so, which ones? \_\_\_\_\_

3. Is your Administrative Approval completed by the school official authorized to grant the required salary and leave arrangements? ☐ Yes ☐ No

4. Make sure you are eligible for all the positions in the countries you listed in Section II of your application:

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| a. Are you fluent in the required languages?                   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. Are you currently employed at the specified teaching level? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. Are you currently employed in the specified subject field?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

\*All reference forms submitted must include original signatures. The reference forms may be included with your application package or mailed under separate cover. References mailed under separate cover may be submitted after the October 15 deadline.

Note: Public reporting burden for this collection of information is estimated to average two (2) hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This information is being collected to evaluate a candidate's eligibility and suitability to be matched with a foreign counterpart for the Fulbright Teacher and Administrator Exchange Program. Responses are voluntary; however, insufficient applicant data could disable successful matching. A federal agency may not conduct or sponsor, and the respondent is not required to respond to, a collection of information unless it displays a valid OMB control number. Send documents regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to A/RPS/DIR, U.S. Dept. of State, Washington, DC 20520.



## Interview Committee Sites

### ALABAMA

1 Montgomery

### ALASKA

2 Anchorage

### ARIZONA

3 Tempe

4 Tucson

### ARKANSAS

5 Little Rock

### CALIFORNIA

6 Irvine

7 Los Angeles

8 Sacramento

9 San Diego

10 San Francisco

### COLORADO

11 Denver

### CONNECTICUT

12 New Britain

### DISTRICT OF COLUMBIA

13 Washington

### FLORIDA

14 Gainesville

15 Miami

### GEORGIA

16 Kennesaw

### HAWAII

17 Honolulu

### IDAHO

18 Boise

### ILLINOIS

19 Chicago

### INDIANA

20 Indianapolis

### IOWA

21 Des Moines

### KANSAS

22 Wichita

### KENTUCKY

23 Louisville

### LOUISIANA

24 Baton Rouge

### MAINE

25 Biddeford

### MARYLAND

26 Baltimore

### MASSACHUSETTS

27 Marlborough

### MICHIGAN

28 Bloomfield Hills

29 Traverse City

### MINNESOTA

30 Minneapolis

### MISSISSIPPI

31 Jackson

### MISSOURI

32 Kansas City

33 St. Louis

### MONTANA

34 Missoula

### NEBRASKA

35 Omaha

### NEW HAMPSHIRE

36 Keene

### NEW JERSEY

37 Montclair

### NEW MEXICO

38 Albuquerque

### NEW YORK

39 Hempstead

40 New York City

41 Plattsburg

42 Syracuse

### NORTH CAROLINA

43 Charlotte

### NORTH DAKOTA

44 Jamestown

### OHIO

45 Cincinnati

46 Cleveland

### OKLAHOMA

47 Oklahoma City

### OREGON

48 Portland

### PENNSYLVANIA

49 Harrisburg

50 Philadelphia

51 Pittsburgh

### PUERTO RICO

52 Hato Rey

### SOUTH CAROLINA

53 Columbia

### SOUTH DAKOTA

54 Sioux Falls

### TENNESSEE

55 Nashville

### TEXAS

56 Corpus Christi

57 Dallas

58 El Paso

59 Houston

60 Lubbock

61 San Antonio

### UTAH

62 Ogden

### VIRGIN ISLANDS

63 St. Croix

### VIRGINIA

64 Roanoke

### WASHINGTON

65 Auburn

66 Spokane

### WEST VIRGINIA

67 Institute

### WISCONSIN

68 Madison

### WYOMING

69 Casper



# APPLICATION FOR ADMINISTRATIVE AND TEACHING EXCHANGES AND SEMINARS ABROAD

Please read all instructions before completing this form. Please type or print clearly in black ink. This form may be copied.

ID#: 01

First Choice Interview Site #:	City:	Second Choice Interview Site #:	City:
<b>I. APPLICANT BASIC DATA</b>			
A. Title: <input type="checkbox"/> Dr.      Name (last, first, middle): <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss		F. U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No G. U.S. Veteran: <input type="checkbox"/> Yes <input type="checkbox"/> No	
B. Complete Home Mailing Address (include number, street, city, state, zip code):		H. Disabled: <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please describe:	
C. Home Telephone (area code, number):  Home Fax (area code, number):  Home E-mail:		I. Ethnicity: (select one) <input type="checkbox"/> Hispanic or Latino  <input type="checkbox"/> Not Hispanic or Latino	
D. Date of Birth (month/day/year):  Place of Birth (city, state, country):		J. Race: (select one or more of the following) <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	
E. Have you ever applied to the program before? If so, list all program years for which you applied (e.g., 1989-90, 1998-99):			
<b>II. APPLICATION FOR</b>			
A. TEACHING POSITION: <input type="checkbox"/> Yes <input type="checkbox"/> No List countries in order of preference.			
a. b. c.			
B. ADMINISTRATIVE EXCHANGE: <input type="checkbox"/> Yes <input type="checkbox"/> No List countries in order of preference.		C. ITALIAN SEMINAR ABROAD:	
a. b. c.		<input type="checkbox"/> Yes <input type="checkbox"/> No	
D. Would you consider placement in countries other than those you've listed? <input type="checkbox"/> Yes <input type="checkbox"/> No			
E. Both public and private schools participate in this program. Indicate a preference, if you wish:			
F. Is your spouse applying for a position abroad through this program? <input type="checkbox"/> Yes <input type="checkbox"/> No			
1. If so, will you accept a position if no position is offered to your spouse? <input type="checkbox"/> Yes <input type="checkbox"/> No			
2. Are you and your spouse willing to be placed in different locations? <input type="checkbox"/> Yes <input type="checkbox"/> No			

III. MODERN FOREIGN LANGUAGE FLUENCY (Applicants for seminar only need not complete this section)												
Language	Understanding			Speaking			Reading			Writing		
	Exc.	Good	Fair	Exc.	Good	Fair	Exc.	Good	Fair	Exc.	Good	Fair

IV. EDUCATION AND PROFESSIONAL PREPARATION ABOVE SECONDARY SCHOOL (List degrees in chronological order.)					
Institution, Location	Dates Attended		Degrees Received		Major Subjects
	From	To	Kind	Date	

V. PRESENT EMPLOYMENT	
A. Present Position Title:	In Present Position From (date):
B. Name and Address of School (include number, street, city, state, zip code):	Telephone (area code, number):
	Fax (area code, number):
C. School Principal's or College Dean's Name (include Dr., Mr., Mrs., Ms., or Miss)	
School Principal's or College Dean's Job Title:	Telephone (area code, number):
D. Immediate Supervisor's Name (include Dr., Mr., Mrs., Ms., or Miss)	
Immediate Supervisor's Job Title:	Telephone (area code, number):
E. Approving Administrative Official's Name (include Dr., Mr., Mrs., Ms., or Miss): Note: Must be the official authorized to approve participation in the exchange, grant a leave of absence, and approve the appropriate salary arrangements, e.g., President, Headmaster, Superintendent or District Official. See "Administrative Approval for Applicant" form.	
Approving Administrative Official's Job Title:	Telephone (area code, number):
Name and Address of Approving Administrative Official's Institution (include number, street, city, state, zip code):	

<b>VI. DAILY SCHEDULE FOR CURRENT YEAR (Administrator Exchange applicants describe duties on separate sheet.)</b>					
A. Subjects: Be specific and provide details (e.g., World History: European emphasis). Special Education teachers are requested to include details about student needs and teaching approaches.	Number of Teaching Hours Per Week	Grade Level and Age of Students		Number of Students	
		Grade	Age		
----- TOTAL -----					
B. Would your administration be willing to alter this course load for the foreign teacher? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>					
C. Additional Activities: Describe workload other than a teaching position (e.g., counseling, supervision, curriculum development, extra-curricular activities).	Number of Teaching Hours Per Week	Grade Level and Age of Students		Number of Students	
		Grade	Age		
D. What is the best time to call you at school?					
E. Have you been absent more than six days per year in the last three years? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span> If yes, please explain:					
<b>VII. PREVIOUS EXPERIENCE / EMPLOYMENT</b>					
A. List any full-time teaching/administrative experience within the last ten years, beginning with the most recent:					
Dates		Position Title	Name and Location	Full Time Teaching Position	
From	To			Grade	Subject
B. List any experiences you have had studying, working or traveling abroad:					
Dates		Country	Purpose of Visit		
From	To				
C. List memberships in educational, professional, and civic associations:					
D. List awards and publications:					

**VIII. OTHER EXPERIENCE (Applicants for seminar only need not complete this section.)**

A. List extracurricular activities you can direct or sponsor (e.g., sports, arts, dramatics, music, needlework, etc.):

B. List educational experiences you have had which would be especially helpful to you in working abroad (e.g., working with bilingual students, student exchange programs, etc.):

C. List experiences you have had in teaching English to non-native speakers:

D. Describe experiences you have had in teaching American Studies/American Literature:

**IX. U.S. GOVERNMENT EDUCATIONAL EXCHANGE GRANTS**

A. Have you ever received a U.S. Government educational exchange grant? ☐ Yes ☐ No  
If yes, please indicate the year, country, type of grant and sponsoring agency:

B. If you did not accept or complete the grant, explain briefly:



<b>X. SCHOOL OR COLLEGE INFORMATION</b>				
A. If school is primary or secondary, is it year-round?		<input type="checkbox"/> No <input type="checkbox"/> Yes	Number of terms _____	
B. Dates of current school year terms:		Fall (from: _____ to: _____ )	Spring (from: _____ to: _____ )	
C. No. of school teaching staff:		No. of faculty in department:	No. of students in institution:	
D. School type: <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Religious		E. School location: <input type="checkbox"/> Urban <input type="checkbox"/> Suburban <input type="checkbox"/> Rural		
F. Description of school / college (include academic level, composition of student body, teaching method, resource materials, special features, etc.). Use additional sheet if necessary:				
<b>XI. ACCOMMODATIONS (Applicants for seminar and administrative exchanges only need not complete this section.)</b>				
A. HOUSEHOLD MEMBERS (other than applicant):				
Names	Relationship Code H: Husband W: Wife D: Daughter S: Son O: Other	Dates of birth of dependents 21 and below	To accompany on teaching assignment (Check one)	
			Yes	No
B. HOUSING:				
Are you willing to exchange housing?		<input type="checkbox"/> Yes <input type="checkbox"/> No	Proximity to School (miles)	
If yes, type of accommodation: <input type="checkbox"/> House <input type="checkbox"/> Apartment <input type="checkbox"/> Other (Describe)				
Number of rooms:		Number of bedrooms:		Number of beds:
Number of persons who can live comfortably:		Adults:		Children
Housing location:		<input type="checkbox"/> Urban <input type="checkbox"/> Suburban <input type="checkbox"/> Rural		
Is adequate public transportation available in the community?		Does it run between your home and your school?		
Do daily tasks in your community require use of a car, e.g., grocery shopping, doctor visits, etc.?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>XII. ESSAY</b>				
On no more than two additional pages, please write one essay addressing the following:				
A. Providing a narrative picture of yourself. The essay should deal with your personal history, focusing on influences on your intellectual development, the educational and cultural opportunities (or lack of them) to which you have been exposed, and the ways in which these experiences have affected you. Also include your special interests and abilities.				
B. Describing future career goals and plans, especially ways you plan to use your experience abroad in your professional work in this country and to enhance international education in your school/college and community.				

XIII. REMARKS (Additional space for answers: Use this space to provide additional information on any item. Write the number and letter of the item to which each answer applies. If you need more space, attach additional sheets.)

### Terms of Agreement If Selected

1. I agree to reflect the ideals of the United States of America while observing and obeying the laws of the country in which I will be exchanging.
2. For teacher exchange applicants: When requested, I will have a complete physical examination and will submit a physician's "Report of Medical Examination." I will also submit a "Statement of Health for Dependents" form from a physician for all who accompany me. All medical examinations will be at my expense. In addition, I guarantee that I and anyone accompanying me will have comprehensive medical insurance sufficient to cover any major medical contingency which may occur while abroad.

For seminar and administrative exchange applicants: When requested, I will submit a statement of health from a physician. I understand that a medical examination report, completed at my expense, may be required.

3. I am aware that travel before a grant is awarded is not reimbursable.
4. If required by my grant, I will travel on aircraft designated for the transportation of the United States grantees.
5. I will attend all orientation activities in the United States or abroad.
6. If selected for a teaching assignment abroad, I will complete my assignment in the country to which I am assigned, remaining, if necessary, beyond the usual closing date in the United States. I will return to my teaching post in the United States for the year following my exchange year unless an extension of my leave is authorized by my school authority.

If selected for a seminar program or administrative assignment, I will complete it, participate in all activities, and complete all required assignments. I will not be accompanied by dependents, relatives, or friends until the termination of the seminar or administrative assignment.

7. I will accept no employment other than my position as an exchange teacher during my stay abroad, unless approved in writing by the administering foundation, commission, or embassy.
8. I am aware that, should the exchange be terminated as a result of my inability to fulfill the obligations, I may be asked to reimburse funds expended on my exchange.
9. I am aware that no one or more of the following will be liable for any claim or claims resulting from either exchange partners' failure to enter upon or to complete the program outlined in the grant: the FSB, the United States Department of State, the cooperating agency, and the commission or post.

I certify that I have read and understand the "Terms of Agreement" and that the information provided in this application is, to the best of my knowledge, true and correct. I am aware that a false statement may be grounds for non-selection or termination of my exchange. I further certify that I have notified the Teacher Exchange Branch of any misdemeanor (except minor traffic violation) or felony convictions or pending indictments. My signature confirms that I will abide by the "Terms of Agreement" if selected for program participation.

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

## Administrative Approval for Applicant

#1, 2, and 3 are to be completed by the applicant

ID#: 01

1. Name of Applicant (last, first, middle):	
2. First Country Choice:	3. First Choice Interview Site #:
<p>4. INSTRUCTIONS FOR APPROVING ADMINISTRATOR: Please complete the following sections and sign this form to certify your approval or disapproval of the applicant's pursuit of an exchange, one-way assignment, or seminar opportunity through the Fulbright Teacher and Administrator Exchange Program. If you check the approval box in 4A, please be sure to check all applicable boxes under it, indicating the type of leave to be granted and whether or not your teacher has undergone a criminal background check (you may check more than one box). (Please see reverse of this form.)</p>	
<b>A. APPROVAL</b>	
<div style="display: flex; align-items: flex-start;"> <div style="width: 40px; text-align: center; margin-right: 10px;"> <input type="checkbox"/> </div> <div> <p>The above applicant is employed full-time by our college, school or school system. The applicant has, in my judgment, superior qualifications and will be an excellent representative of American education abroad. If we and all other necessary parties agree to a proposed assignment, the following leave(s) of absence will be approved and the applicant will be released under the conditions checked below in order to accept a position under the Fulbright Teacher and Administrator Exchange Program.</p> </div> </div>	
<div style="display: flex; align-items: flex-start;"> <div style="width: 40px; text-align: center; margin-right: 10px;"> <input type="checkbox"/> </div> <div> <p>With salary: This applies to teacher exchanges with ARGENTINA, BENIN, BULGARIA, BRAZIL, CANADA, CHILE, COLOMBIA, THE CZECH REPUBLIC, ESTONIA, FINLAND, FRANCE, GERMANY, HUNGARY, ISRAEL, LATVIA, MEXICO, MOROCCO, THE NETHERLANDS, NORWAY, PERU, POLAND, REPUBLIC OF IRELAND, ROMANIA, SENEGAL, SLOVAKIA, SOUTH AFRICA, SPAIN, TURKEY, THE UNITED KINGDOM and ZIMBABWE; and to administrator exchanges with CANADA, COLOMBIA, ESTONIA, MEXICO, TURKEY and THE UNITED KINGDOM.</p> </div> </div>	
<div style="display: flex; align-items: flex-start;"> <div style="width: 40px; text-align: center; margin-right: 10px;"> <input type="checkbox"/> </div> <div> <p>Without salary: This applies to teacher exchanges with BRAZIL, BULGARIA and MOROCCO; and to administrator exchanges in CANADA, COLOMBIA, ESTONIA, MEXICO, TURKEY and THE UNITED KINGDOM.</p> </div> </div>	
<div style="display: flex; align-items: flex-start;"> <div style="width: 40px; text-align: center; margin-right: 10px;"> <input type="checkbox"/> </div> <div> <p>Summer Seminar: Either no leave of absence is required, or the teacher will be given, with or without pay, the leave of absence required for participation in the ITALY CLASSICS SEMINAR.</p> </div> </div>	
<div style="display: flex; align-items: flex-start;"> <div style="width: 40px; text-align: center; margin-right: 10px;"> <input type="checkbox"/> Yes             <input type="checkbox"/> No           </div> <div> <p>According to institutional/district procedures, we conducted a criminal background check of the applicant at the time of his/her employment.</p> </div> </div>	
<b>B. DISAPPROVAL</b>	
<div style="display: flex; align-items: flex-start;"> <div style="width: 40px; text-align: center; margin-right: 10px;"> <input type="checkbox"/> </div> <div> <p>The above teacher/administrator is employed by our school or school system and will not be granted a leave of absence.</p> </div> </div>	
<b>C. OFFICIAL SIGNATURE</b>	
<p>Note: This form must be completed and signed by the official who is authorized to approve participation in the exchange, grant a leave of absence, and approve the appropriate salary arrangements for the college, school or school system in which the applicant is employed, e.g., President, Headmaster, Superintendent or District Official.</p>	
<p>Name and Job Title of Chief Administrator or Authorized Official (President, Headmaster, Superintendent or District Official):</p>	
<p>Name and Address of School or School System (include number, street, city, state, and zip code):</p>	
<p>Signature of Chief Administrator or Authorized Official (President, Headmaster, Superintendent or District Official):</p>	
Name:	Date:

This form is subject to release, on written request, to the applicant. (Privacy Act of 1974, Freedom of Information Act.)

## About The Fulbright Teacher and Administrator Exchange Program

The purpose of the Fulbright Teacher and Administrator Exchange Program is to help promote mutual understanding between the people of the United States and the people of other countries through educational exchange. Teachers and administrators participating in the program have the opportunity to live and work abroad by exchanging positions with educators from similar institutions in over twenty countries. Teachers may also apply to attend the summer Classics Seminar in Italy.

Fulbright Exchange Teachers usually exchange positions with foreign teachers for an academic year. By living and working in the cultures of their host countries, they gain an understanding and appreciation of the similarities and the differences between nations. If your teacher is proposed for an exchange, you will have the opportunity to review the credentials of the foreign teacher and to accept or reject the proposed exchange arrangement. In order for an exchange to take place it must be accepted by the U.S. teacher, the U.S. administrators, the foreign teacher, and the foreign administrators, and must be approved by the J. William Fulbright Foreign Scholarship Board (FSB). **At the time of this application your signature on the reverse administrative approval form simply enables your teacher to be eligible for the program and indicates your willingness to consider a Fulbright Teacher Exchange at your school/college.**

The success of the Fulbright Teacher and Administrator Exchange Program in increasing international understanding and properly representing the educational system and other aspects of American life and culture depends greatly upon the exercise of judgment by school administrators in approving their teachers'/administrators' participation in the program. It is important to the reputation of the program and the American educational system, as well as that of the participating school, that an applicant be approved for participation only if the approving official has no reservations about his or her character, reliability and adaptability, and judges him or her to have superior qualifications and to be an excellent representative of American education.

Most exchanges occur with both U.S. teachers and foreign teachers receiving their regular salaries from their home schools while teaching and living abroad, though specific arrangements vary for each country. U.S. schools will not be asked to pay the salaries of the foreign exchange teachers. Housing arrangements are the responsibility of the teachers involved.

Both the U.S. and the foreign teacher will be provided with a limited medical insurance policy by the U.S. government. However, your teacher should continue his or her current coverage from your school, and we encourage you to consider including your foreign teacher and any accompanying family members in your local group health plan.

**Please return this form to:**  
**Fulbright Teacher and Administrator Exchange Program**  
**600 Maryland Avenue, S.W., Suite 320**  
**Washington, D.C. 20024**  
**Tel (202) 314-3520**

### *Immediate Supervisor Reference for Applicant*

IMPORTANT: The success of this program depends on the selection of educators whose qualifications give promise of outstanding success under unusual circumstances abroad. Please see Fulbright Teacher and Administrator Exchange Program description on the reverse of form.

#1, 2, and 3 are to be completed by the applicant.

ID#: 01

1. Name of Applicant (last, first, middle):				
2. First Country Choice:		3. First Choice Interview Site #:		
4. Check the Applicant's professional qualifications and personal traits:				
Item	Superior	Above Average	Average	Below Average
<b>PROFESSIONAL QUALIFICATIONS</b>				
Knowledge of the subject field				
Effectiveness with students of diverse levels of preparation				
Ability to work with colleagues, including those with divergent views				
Adherence to established administrative policies and procedures				
<b>PERSONAL TRAITS</b>				
Adaptability				
Resourcefulness				
Self-reliance				
Initiative				
5. Additional comments on the applicant's professional competence, experience, accomplishments, and personal qualities. Also indicate any limitations. Use additional page if necessary.				
6. Number of years you have known applicant:		7. Is the applicant a full-time teacher/administrator?		
8. Please provide a general description of your teacher's school/college environment and comment on how you feel the school, college, or district will benefit from participating in the Fulbright Teacher and Administrator Exchange Program. Use additional page if necessary.				
9. Can the U.S. teacher's course load be altered for the foreign teacher? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>				
10. Please describe any special consideration that could be given to the incoming exchange teacher, (e.g., orientation, reduced teaching load, extra preparation periods, special assignments teaching about home country culture, special support staff to assist exchange teacher with instructional or related duties, other).. Please continue on the reverse of this page, or use additional sheets.				
11. Name and Job Title (include Dr., Mr., Mrs., Ms., Miss):				
12. Name and Address of School (include number, street, city, state and zip code):				
13. Signature:		14. Date:		

This form is subject to release, on written request, to the applicant. (Privacy Act of 1974, Freedom of Information Act.)

Additional Space for Items 5, 8 and 10:

### **About The Fulbright Teacher and Administrator Exchange Program**

The purpose of the Fulbright Teacher and Administrator Exchange Program is to help promote mutual understanding between the people of the United States and the people of other countries through educational exchange. Teachers and administrators participating in the program have the opportunity to live and work abroad by exchanging positions with educators from similar institutions in over twenty countries. Teachers may also apply to attend the summer Classics Seminar in Italy.

Fulbright Exchange Teachers usually exchange positions with foreign teachers for an academic year. By living and working in the cultures of their host countries, they gain an understanding and appreciation of the similarities and the differences between nations. Visiting teachers share new perceptions with their students, and the returned Fulbright Exchange Teachers transmit an ongoing sense of awareness about what is happening in that part of the world in which they have been living and teaching.

**Please return this form to:**  
**Fulbright Teacher and Administrator Exchange Program**  
**600 Maryland Avenue, S.W., Suite 320**  
**Washington, D.C. 20024**  
**Tel (202) 314-3520**

### Reference for Applicant

IMPORTANT: The success of this program depends on the selection of educators whose qualifications give promise of outstanding success under unusual circumstances abroad. Please see Fulbright Teacher and Administrator Exchange Program description on the reverse of form.

#1, 2, and 3 are to be completed by the applicant.

ID#: 01

1. Name of Applicant (last, first, middle):				
2. First Country Choice:		3. First Choice Interview Site #:		
4. Check the Applicant's professional qualifications and personal traits:				
Item	Superior	Above Average	Average	Below Average
<b>PROFESSIONAL QUALIFICATIONS</b>				
Knowledge of the subject field				
Effectiveness with students of diverse levels of preparation				
Ability to work with colleagues, including those with divergent views				
Adherence to established administrative policies and procedures				
<b>PERSONAL TRAITS</b>				
Adaptability				
Resourcefulness				
Self-reliance				
Initiative				
5. Additional comments on the applicant's professional competence, experience, accomplishments, and personal qualities. Also indicate any limitations. Use back of page if necessary.				
6. Professional relationship to the applicant		7. Number of years you have known the applicant:		
8. Name and Job Title (include Dr., Mr., Mrs., Ms., Miss):				
9. Professional Address (include institution, number, street, city, state and zip code):				
10. Signature:		11. Date:		

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**Please return this form to:**  
**Fulbright Teacher and Administrator Exchange Program**  
**600 Maryland Avenue, S.W., Room 320**  
**Washington, D.C. 20024**  
**Tel (202) 314-3520 Fax (202) 479-6806**



### Reference for Applicant

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Item	Superior	Above Average	Average	Below Average
<b>PROFESSIONAL QUALIFICATIONS</b>				
Knowledge of the subject field				
Effectiveness with students of diverse levels of preparation				
Ability to work with colleagues, including those with divergent views				
Adherence to established administrative policies and procedures				
<b>PERSONAL TRAITS</b>				
Adaptability				
Resourcefulness				
Self-reliance				
Initiative				
5. Additional comments on the applicant's professional competence, experience, accomplishments, and personal qualities. Also indicate any limitations. Use back of page if necessary.				
6. Professional relationship to the applicant		7. Number of years you have known the applicant:		
8. Name and Job Title (include Dr., Mr., Mrs., Ms., Miss):				
9. Professional Address (include institution, number, street, city, state and zip code):				
10. Signature:		11. Date:		

This form is subject to release, on written request, to the applicant. (Privacy Act of 1974, Freedom of Information Act.)

### **About The Fulbright Teacher and Administrator Exchange Program**

The purpose of the Fulbright Teacher and Administrator Exchange Program is to help promote mutual understanding between the people of the United States and the people of other countries through educational exchange. Teachers and administrators participating in the program have the opportunity to live and work abroad by exchanging positions with educators from similar institutions in over twenty countries. Teachers may also apply to attend the summer Classics Seminar in Italy.

Fulbright Exchange Teachers usually exchange positions with foreign teachers for an academic year. By living and working in the cultures of their host countries, they gain an understanding and appreciation of the similarities and the differences between nations. Visiting teachers share new perceptions with their students, and the returned Fulbright Exchange Teachers transmit an ongoing sense of awareness about what is happening in that part of the world in which they have been living and teaching.

**Please return this form to:**  
**Fulbright Teacher and Administrator Exchange Program**  
**600 Maryland Avenue, S.W., Room 320**  
**Washington, D.C. 20024**  
**Tel (202) 314-3520 Fax (202) 479-6806**



## Fulbright Teacher and Administrator Exchange 2001-2002 Program Information Questionnaire

Please complete and return this form regardless of whether or not you decide to apply for the program. Completing this questionnaire is voluntary. This form should be mailed separately from the application. No postage is necessary.

1. Your state\_\_\_\_\_
2. Your teaching subject and level\_\_\_\_\_
3. How did you find out about the Fulbright Teacher and Administrator Exchange Program? (Please indicate the approximate date.)  
\_\_\_\_ Professional Journal (name)\_\_\_\_\_  
\_\_\_\_ Newspaper Article (name)\_\_\_\_\_  
\_\_\_\_ Magazine Advertisement (name)\_\_\_\_\_  
\_\_\_\_ School Newsletter (name)\_\_\_\_\_  
\_\_\_\_ A Publication or Letter distributed by the Fulbright Teacher and Administrator Exchange Program  
(please specify)\_\_\_\_\_  
\_\_\_\_ A Foreign Teacher presently on exchange in your school or community  
\_\_\_\_ (name of teacher and school)\_\_\_\_\_  
\_\_\_\_ A former Fulbright Participant (name)\_\_\_\_\_  
\_\_\_\_ School or College Administrator\_\_\_\_\_  
\_\_\_\_ I am a former applicant to the Fulbright Teacher and Administrator Exchange Program  
(year)\_\_\_\_\_
- \_\_\_\_ Conference\_\_\_\_\_
- \_\_\_\_ Other\_\_\_\_\_
4. When did you request the application (please give an approximate date)?\_\_\_\_\_
5. When did you receive the application (please give an approximate date)?\_\_\_\_\_
6. How did you receive the application? \_\_\_\_\_ Fulbright Office \_\_\_\_\_ Conference  
\_\_\_\_ School or College Administrator \_\_\_\_\_ Colleague \_\_\_\_\_ Other
7. Have you decided to apply for the program this year?\_\_\_\_\_
- If not, why not?\_\_\_\_\_
8. Are there countries, not presently in the program, that you are interested in exchanging in? Please specify:  
\_\_\_\_\_
9. Do you have any further suggestions for future recruitment and advertising techniques? Please specify:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Agencies Administering Fulbright Programs  
in Cooperation with the United States Department of State and  
the J. William Fulbright Foreign Scholarship Board**

Fulbright Teacher and Administrator Exchange Program  
International Institute  
600 Maryland Avenue, S.W., Ste. 320  
Washington, D.C. 20024  
(202) 314-3520  
Fulbright@grad.usda.gov  
[www.grad.usda.gov/International/ftep.html](http://www.grad.usda.gov/International/ftep.html)

Teaching and Administrative Exchanges for American elementary, middle and high school teachers, college faculty, and education administrators at these same levels.

Studies Abroad Program  
International Education and Graduate Programs  
The Office of Higher Education Programs  
600 Independence Avenue, S.W., Ste. 600  
U.S. Department of Education  
Washington, D.C. 20202  
(202) 401-9776  
[www.ed.gov/offices/OPE/OHEP/iegps/sap.html](http://www.ed.gov/offices/OPE/OHEP/iegps/sap.html)

Short-term seminars abroad for American senior high school teachers, college and university faculty and education administrators at these same levels.

Fulbright Scholars  
Council for International  
Exchange of Scholars  
3007 Tilden Street, N.W., Suite 5L  
Washington, D.C. 20008  
(202) 686-4000  
[www.iie.org/cies](http://www.iie.org/cies)

University lecturing and advanced research abroad (postdoctoral).

Fulbright Students  
Institute of International Education  
809 United Nations Plaza  
New York, N.Y. 10017  
(212) 984-5330  
[info@iie.org](mailto:info@iie.org)  
[www.iie.org/fulbright/us](http://www.iie.org/fulbright/us)

Graduate study abroad (predoctoral).

College and University Affiliations Program  
Specialized Programs Unit  
United States Information Agency  
301 4th Street, S.W.  
Washington, D.C. 20547  
(202) 619-5289  
[www.usia.gov](http://www.usia.gov)

Short-term college and university faculty exchanges to foster sustained institutional partnership.

Hubert H. Humphrey Fellowship Program  
Institute of International Education  
1400 K Street, N.W., Suite 650  
Washington, D.C. 20005  
(202) 326-7701  
[hhh@iie.org](mailto:hhh@iie.org)  
[www.iie.org/pgms/hhh](http://www.iie.org/pgms/hhh)

Brings mid-career foreign professionals to U.S. for a year of work/study.